



#### THE WOMAN ROLE ACCORDING TO A LIFECOURSE HEALTH PROMOTION PERSPECTIVE

Angela GIUSTI (National Institute of Health) GENDER IMPLICATION

#### The ASSET FINAL EVENT

Share and move for mobilization and mutual learning at local, national and international levels on Science in Society related issues in epidemics and pandemics Rome, 30-31.10.2017



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**ASSET** Action plan on Science in Society related issues in Epidemics and Total pandemics



NO

NO

NO

### Disclosures

Health Industry Interests Relevant to Presentation

#### Angela Giusti

- 1 Patent holder/Shareholder or member or employee of a NO health industry
   2 Consultant or member of a scientific council of a health
- 2 Consultant or member of a scientific council of a health industry
- 3 Paid speaker or author/editor of articles or documents for a health industry
- 4 Payment of travel expenses, lodging, or conference/event
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- 5 Principal Investigator or co-investigator of a research or clinical study for a health industry



"If a new vaccine became available that could prevent 1 million or more child deaths a year, and that was moreover cheap, safe, administered orally, and required no cold chain, it would become an immediate public health imperative.

Breastfeeding could do all this and more, but it requires its own "*warm chain*" of support that is, skilled care for mothers to build their confidence and show them what to do, and protection from harmful practices."



Dobbing J et al. Warm chain for breastfeeding. The Lancet, 1994



### Where does health come from? The concept of Primal Health

- The Primal Period, the period of human development when the basic adaptive systems related to our health reach their maturity (pregnancy→2yrs)
- Basing on the recent research on neurobiology, human microbiome and epigenetics we are starting to understand how determinant the Primal Period is for human health – as individuals and population



## The human microbiome Video





## The human metagenome



Human microbiome 1,000,000+ genes

 $\rightarrow$  The MB is species-specific and individual-specific

→ Our systems <u>do not</u> work basing on our genetic code (23,000 genes); our biology is based on this code + the genetic code of all our bacteria (1,000,000 genes), through an incredible and little-known interaction

HOW YOUR BODY'S MICROBES HOLD THE KEY TO HEALTH AND HAPPINESS

10%

#### Alanna Collen

Humar



## THE HUMAN

Bacteria, fungi, and viruses outnumber human cells in the body by a factor of 10 to one. The microbes synthesize key nutrients, fend off pathogens and impact everything from weight gain to perhaps even brain development. The Human Microbiome Project is doing a census of the microbes and sequencing the genomes of many. The total body count is not in but it's believed over 1,000 different species live in and on the body.

#### 25 SPECIES

in the stomach include: -----

Helicobacter pylori
 Streptococcus thermophilus

#### 500-1,000 SPECIES

in the intestines include: ----

Lactobacillus casei
Lactobacillus reuteri
Lactobacillus gasseri
Escherichia coli
Bacteroides fragilis
Bacteroides thetaiotaomicron
Lactobacillus rhamnosus
Clostridium difficile

# MICROBIOME

## 600+

#### in the mouth, pharynx and respiratory system include:

Streptococcus viridans
Neisseria sicca
Candida albicans
Streptococcus salivarius

#### 1,000 SPECIES

in the skin include:

Pityrosporum ovale
 Staphylococcus epidermidis
 Corynebacterium jeikeium
 Trichosporon
 Staphylococcus haemolyticus



in the urogenital tract include:

Ureaplasma parvum
 Corynebacterium aurimucosum

#### Diseases influenced by gut microbial metabolism.

The variety of systemic diseases that are directly influenced by gut microbial metabolism and its influence on other mammalian pathways, such as the innate immune system, are shown.

Specifically highlighted are the metabolic pathways involved in drug metabolism and obesity that are directly influenced by the gut microbial Kinross J et al. Gut microbiome-host interactions in health and disease. 2011

#### 1C. bolteae / clostridia spores Mechanism unkown 2. Mood: depression, anxiety Asthma / atopy Hygiene hypothesis: Exagerrated innate immune response Upregulation of regulatory T cells after capture of Ags by DCs Bifidobacteria, Gram +ve organisms Clostridia Hypertension ischemic heart disease Peripheral vascular disease Result of metabolic syndrome Altered lipid deposition /

Gut-brain hypothesis

1. Autism

Diet high in red meat and animal fat Low SCFA / butyrate High fecal fats Low vitamin absorption ↑ 7α dehydroxylating bacteria: cholic acid→deoxycholic acid (co-carcinogen) Low in H<sub>a</sub>S metabolizing bacteria

Biliary disease Altered enterohepatic circulation of bile

Altered xenobiotic / drug metabolism

e.g. Paracetamol metabolism:

1 predose urinary *p*-cresol sulfate leads to 1 postdose urinary acetaminophen sulfate : acetaminophen glucuronide. Bacterially mediated *p*-cresol generation and competitive *o*-sulfonation of *p*-cresol reduces the effective systemic capacity to sulfonate acetaminophen.

#### Obesity / metabolic syndrome

LBacteroidetes and TActinobacteria in obese Altered energy / lipid metabolism Higher relative abundance of glycoside hydrolases, carbohydrate-binding modules, glycosyltransferases, polysaccharide lyases, and carbohydrate esterases in the Bacteroidetes TLR mediated

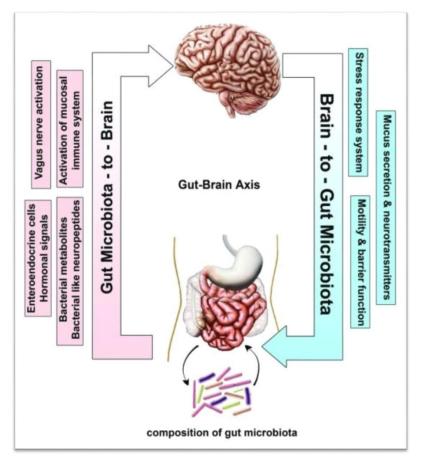
Inflammatory bowel disease

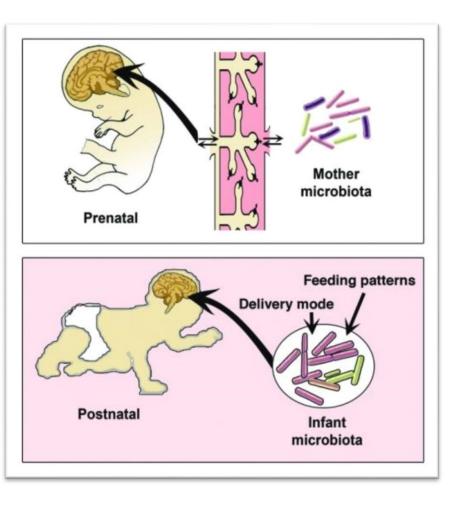
Hygiene hypothesis Altered immune response: TLR signaling Less microbial diversity Activation of specific species: for example, *Escherichia* 

#### Influence of external factors on intestinal microbiota of infants Intrauterine contamination Familial environment (translocation) **Delivery Mode** Caesarean section Vaginal Bifidobacterium Clostridium Lactobacillus Staphyloccus Lactobacillus Corynebacterium Prevotella Enterococcus Propionibacterium Sneathia Time of weaning Gestational age and foods chosen **First Weeks First months** Adult-like microbiota Prenatal Birth Maternal microbes. Hospitalisation antibiotic use infection/ Treatments illness, diet and lifestyle **Probiotics-Prebiotics** Antibiotics Reduction in Bifidobacterium **Type of Feeding** Lactobacillus microbial Genetics/ Breastfeeding Formula feeding diversity Epigenetics Bifidobacterium Enterobacteriaceae (Collado et al 2012, Fouhy et al 2012, Margues et al 2010, Matamoros et al 2013) \*\*Green- beneficial modification, red- modification considered negative for health



## Gut microbiota-to-Brain communications during prenatal and postnatal development.



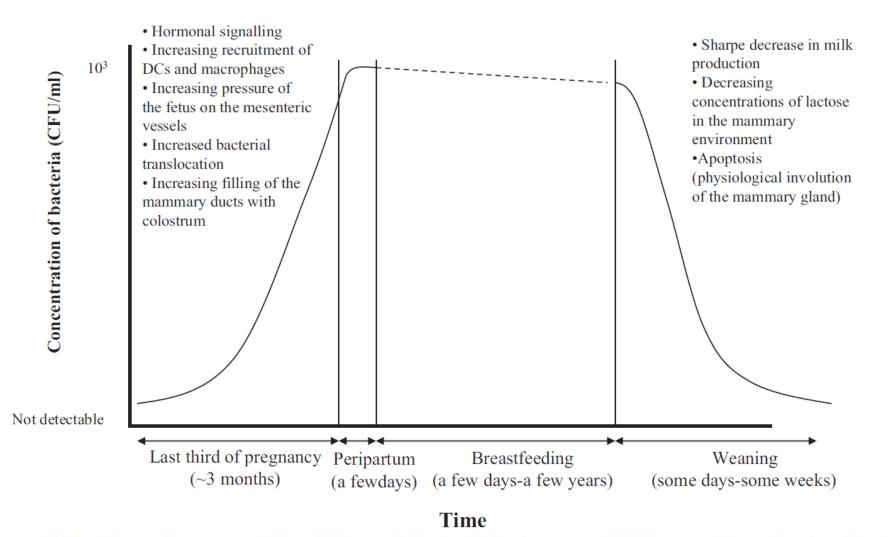


#### Al-Asmakh, 2012. Tognini, 2017





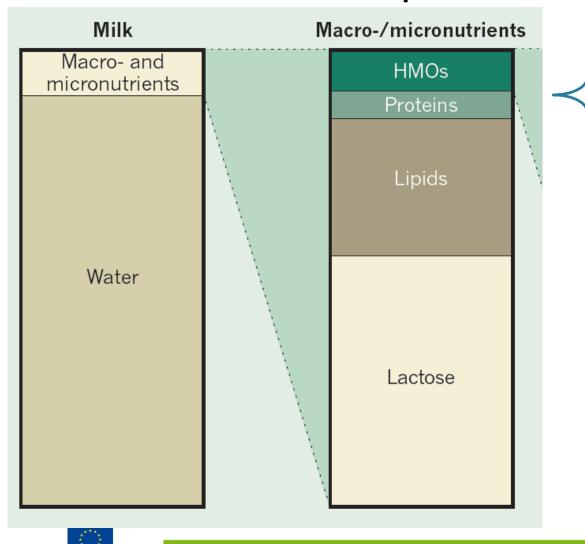
# Colostrum and mother's milk: a source of probiotic bacteria for the baby



**Fig. 1.** Schematic representation of the acquisition and development of the human mammary microbiota. *L. Fernández et al. / Pharmacological Research 69 (2013) 1–10* 

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# Oligosaccharides in human milk (HMOs) and their prebiotic function



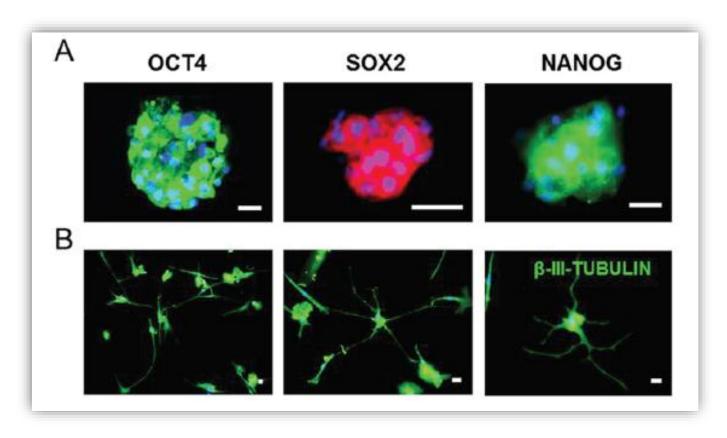
- HMOs are food for friendly bacteria, particularly the gut microbiota
- Shorter chain HMOs in colostrum are almost entirely consumed by Bidobacterium infantis, protecting the newborn from diarrhea.
- HMOs vary in quantity and quality according to the baby's needs

Zivkovic, 2013

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### Breast milk and stem cells



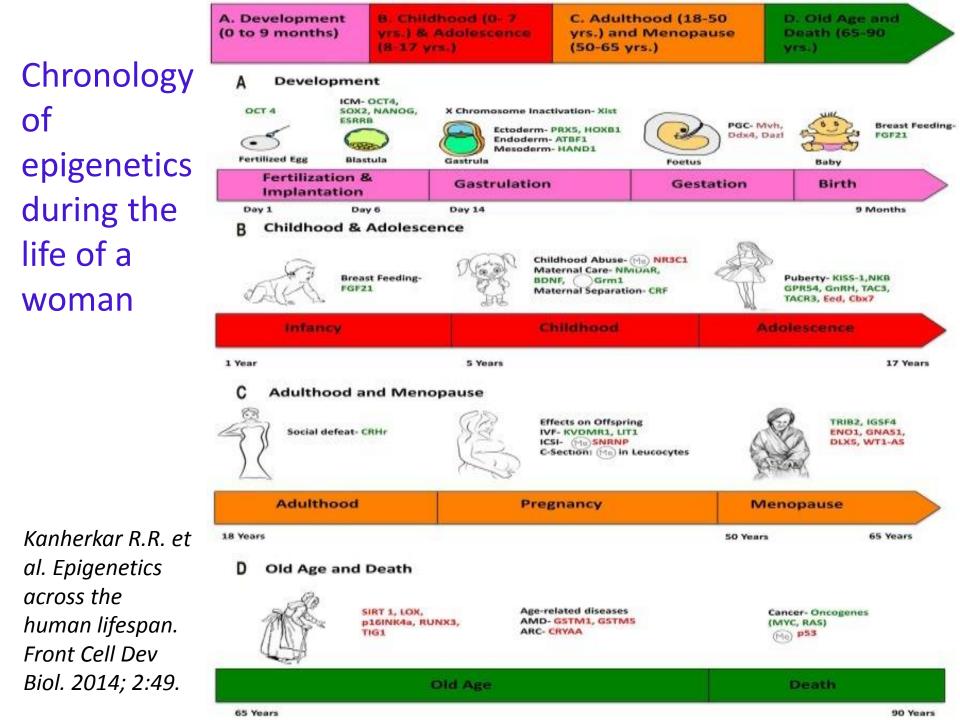
A. HBSC cultured as spheroids. B. Neuron-like cells differentiated from HBSC



share and move to face nasty bugs

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Twigger, 2013. Hassitou, sept 2015





### WHO-UNICEF recommendations for a healthy start in life

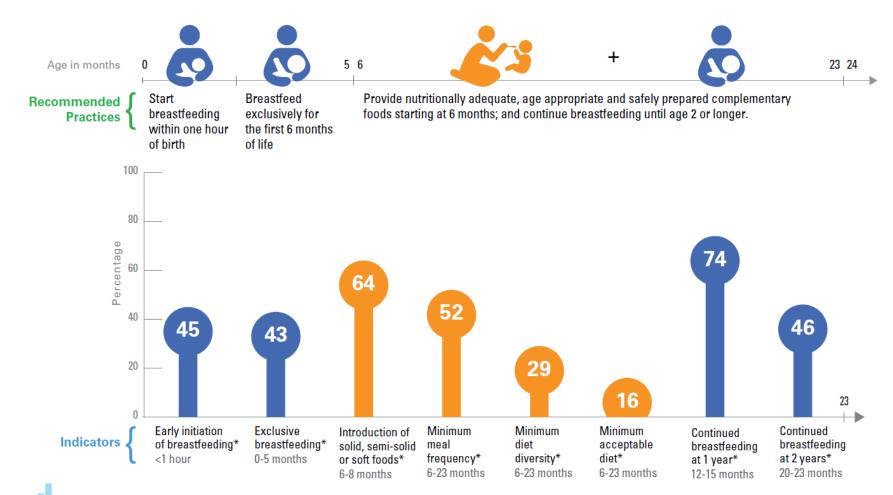
1. Place babies in skin-to-skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognize when their babies are ready to breastfeed, offering help if needed.

In Italy, only 40% of babies are breastfeed within the first hour of life (ISTAT, 2015)

 Exclusively breastfeed infants for the first six months to achieve optimal growth, development and health. Thereafter, they should be given nutritious complementary foods and continue breastfeeding up to the age of two years or beyond, if mutually desired.



## If the world was issued a scorecard for the way its infants and young children were fed it would receive a failing grade



Per cent of children: put to the breast within one hour of birth, exclusively breastfed (0-5 months); introduced to solid, semi-solid or soft foods (6-8 months), with a minimum meal frequency, minimum diet diversity and minimum acceptable diet (6-23 months) and continued breastfeeding at 1 year (12-15 months) and 2 years (20-23 months), 2015.

Source: UNICEF global databases, 2016, based on MICS, DHS and other nationally representative sources. \*See full report at <uni.cf/iycfreport2016> for notes on the data.

The health norm





## Motherhood and feminist movements



We grew up in a strong patriarcal and sexist system.

The women's movement of the Seventies has deserted maternity. The dominion on the female body was powerful, and fascism was not so far from memory, with its rural, prolific and sacrificial mother cult.

What could be more subversive than refusing maternity? If nature had made us slaves, culture would have made us free.

- Motherhood was a hot potato. It was excluded from the debate, as an involuntary and regressive choice to take care only to get rid of it or to find reconciling formulas with the rest of life - nurseries for access to work, contraceptives and abortion rights for a free self-determination, formula feeding for not being relegated to the private and in the role of care giver.
- The feminist movement did not claim and did not recognize pregnancy and childbirth as formative experiences, personal growth, self-discovery.

Source: Marzia Bisognin. Maternità e femminismo. 2014





## A matter of equity

Worse health outcomes



women with low literacy level and socio-economic status and their babies and children

Empowered women yield better health for themselves and for their entourage





## Conclusions

- Protect, promote and support physiology of the primal period
- Policy makers and health sector should ensure action to promote effective and respectful care during pregnancy, childbirth and the first 1000 days (e.g. WHO/UNICEF BFHI&BFCI and Mother-friendly care)
- Create health-supporting environments, thereby also making healthy choices easier choices for women
- Women's right to make their own «best choice»





angela.giusti@iss.it